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UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 8406

SERIAL NUMBER 09/988,241	FILING DATE 11/19/2001 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. 004770.00026
APPLICANTS Toni Paila, Espoo, FINLAND; Jani Paikela, Helsinki, FINLAND; Lin Xu, Tampere, FINLAND; Juha-Pekka Luoma, Tampere, FINLAND; Rod Walsh, Tampere, FINLAND;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/04/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY FINLAND	SHEETS DRAWING 5	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 4
ADDRESS 22907				
TITLE Multicast session handover				
FILING FEE RECEIVED 1112	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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BIBDATASHEET**CONFIRMATION NO. 8406**

Bib Data Sheet

SERIAL NUMBER 09/988,241	FILING DATE 11/19/2001 RULE	CLASS 455	GROUP ART UNIT 2682	ATTORNEY DOCKET NO. 004770.00026
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APPLICANTS

Toni Paila, Espoo, FINLAND;

Jani Paikela, Helsinki, FINLAND;

Lin Xu, Tampere, FINLAND; Juha-Pekka Luoma, Tampere, FINLAND;

Rod Walsh, Tampere, FINLAND;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/04/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY FINLAND	SHEETS DRAWING 5	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 4
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ADDRESS

22907

BANNER & WITCOFF

1001 G STREET N W

SUITE 1100

WASHINGTON, DC

20001

TITLE

Multicast session handover

FILING FEE RECEIVED 1376	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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